

MANAGEMENT

**USE OF ALTERNATIVE WORKPLACES (AWP)
FOR COMMISSIONED CORPS OFFICERS**

CONTENTS

**PURPOSE
BACKGROUND
REFERENCES
DEFINITIONS
POLICY
RESPONSIBILITIES
PROCEDURES
EFFECTIVE DATE**

**Attachment C Sample Memorandum
Authorizing Use of AWP**

PURPOSE

- This MAPP describes the policies and procedures governing the use of alternative workplaces (AWP) for Commissioned Corps Officers in the Center for Drug Evaluation and Research.

BACKGROUND

- The AWP has been established to allow Commissioned Corps Officers to perform work away from their official duty station on a long-term or short-term basis.

REFERENCES

- Division of Commissioned Personnel (DCP), Commissioned Corps Personnel Manual (CCPM) 23.5, Instruction 10 **C** Use of Alternative Workplaces

DEFINITIONS

- **Long-term basis:** Officers working at home for more than 2 consecutive workweeks or 30 cumulative days per calendar year.
- **Short-term basis:** Officers working at home no more than 2 days per week.

POLICY

- CDER supports Commissioned Corps Officers who wish to participate in the use of alternative workplace arrangements.
- Officer participation in AWP is voluntary and may be terminated at any time, either at the request of the officer or at the decision of management. All periods of participation in AWP, whether long-term or short-term, must be approved in advance.
- Such an authorization may be granted for a period not to exceed 6 months.
- Officers participating in AWP are expected to attend meetings at the official duty station, even when such meetings are scheduled on the officer's day to work at the alternative workplace. The officer may attend the meeting by teleconference if authorized by the supervisor. Failure to do so may result in the termination of the officer's participation in the program.
- The work schedule approved for an officer participating in AWP must be observed. Duty time may not be used for purposes other than official work. Although participation in AWP may provide an officer more time to accomplish family responsibilities, AWP is not to be used by the officer to care for young children or other dependents during the agreed upon scheduled hours of work.
- Supervisors must ensure that officers working at an alternative site are readily accessible to management officials, coworkers, and customers.
- No work schedule that includes a break of more than 1 hour per day may be established for an officer participating in AWP.
- All pertinent time and attendance, leave, and pay regulations must be observed by the officers and managers when an officer participates in AWP.

RESPONSIBILITIES

- The authorizing official (immediate supervisor) must sign and issue a memorandum to the officer prior to commencement of duties at the alternative workplace.
- The officer must sign the memorandum in concurrence.
- The second level supervisor, no lower than Division Director, must sign the memorandum.

PROCEDURES

- An authorizing memorandum must be prepared as shown in the attached sample.

- The original memorandum, complete with all required signatures, must be sent to the Center's Commissioned Corps Liaison at MPNI, rm. 150, HFD-060, within 3 days of issuance.
- Once the memorandum has been reviewed by the Center liaison, a copy will be made for the officer's file, logged into a database, then forwarded to the FDA Commissioned Corps Liaison.
- The FDA Commissioned Corps Liaison will deliver the memorandum to DCP for filing in the officer's Official Personnel File (OPF).

EFFECTIVE DATE

This MAPP is effective upon date of publication.

Attachment
Sample Memorandum

Date:**To:** (Officer's Name, PHS Number)**Through:** CDER Commissioned Corps Liaison _____**Through:** FDA Commissioned Corps Liaison _____**Subject:** Alternative Workplace Authorization**From:** (Authorizing Official C Immediate Supervisor)

This memorandum authorizes you to use the following alternative workplace for the period of January 1, 2002 to June 30, 2002, not to exceed 6 months. Your assigned duty hours are _____ a.m. to _____ p.m.

 X Officer's Residence

Address of Alternative Workplace:

Phone: (301) 555-5555**Fax:** (301) 555-5555**E-mail:** doej@cder.fda.gov**Pager:** (301) 555-5555

Your assignment for this period of authorization is to complete _____.
Per our discussion, I anticipate that this project will take you approximately _____ to complete. Should you complete this work prior to June 30, 2002, you are required to report back to your assigned duty station the next business day after finishing the assignment. The following equipment has been issued to you for the performance of these duties: _____. (Attached is a copy of the property pass)

Provisions:

Please provide a status report on your progress on Tuesdays and Thursdays.

(Authorizing Official's Name)

(Office/Division Director Name)

(Authorizing Official's Signature & Date)

(Office/Division Director's Signature & Date)

I agree to work at the alternative workplace in accordance with Instruction 10, Subchapter CC23.5 of the Commissioned Corps Personnel Manual, incorporated herein by reference and as indicated in this memorandum. I understand that I may be directed to work at my regular workplace on specific occasions, such as for training and staff meetings, when required by my supervisor.

(Officer's Signature)

(Date)